No	Yes	ncome, transactions, or liabilities of a spouse or dependent child	Have you excluded from this report any other assets, "unearned" income, transactions, or because they meet all three tests for exemption?	Exemptions Have you excluded from this report any other ass because they meet all three tests for exemption?	
₹	Yes	Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	d Trusts" approved by the Comm lave you excluded from this repor	Trusts Details regarding "Qualified Blin trusts" need not be disclosed. Fig. 1. child?	
	SNOIT	SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWER EACH OF THESE QUESTIONS	IT, OR TRUST INFORM	EXCLUSION OF SPOUSE, DEPENDEN	m
_		schedule attached for each "Yes" response.		If yes, complete and attach Schedule V.	
priate	and the appro	Each question in this part must be answered and the appropriate	able liability (more Yes 🗸 No 🗌	Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?	<
		If yes, complete and attach Schedule IX.		If yes, complete and attach Schedule IV.	
☐ <b>6</b>	Yes	Did you have any reportable agreement or arrangement with an outside IX. entity?	exchange any re reporting Yes 🗸 No		₹
		If yes, complete and attach Schedule VIII.	       	If yes, complete and attach Schedule III.	
No .	g in the Yes 🗸	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	ed" income of le asset worth Yes ✔ No	·	₽
		If yes, complete and attach Schedule VII.		If yes, complete and attach Schedule II.	
No C	1 \$305 Yes 🗸	Did you, your spouse, or a dependent child receive any reportable travel or VII. reimbursements for travel in the reporting period (worth more than \$305 from one source)?	y in lieu of paying iod? Yes ☐ No 🗹	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?	=
		If yes, complete and attach Schedule VI.		If yes, complete and attach Schedule I.	
Z S	Yes	Did you, your spouse, or a dependent child receive any reportable girt in VI. the reporting period (i.e., aggregating more than \$305 and not otherwise exempt)?	s or fees) of \$200 Yes No	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?	Ē
		THESE QUESTIONS	ANSWER EACH OF THESE	PRELIMINARY INFORMATION ANSI	פ
days	more than 30 days late.	Termination Date:	Amendment     Termination	Report Type Annual (May 15)  Ar	
Y shall against	A \$200 penalty shall be assessed against anyone who files	Officer Or Employing Office:	State: NC	Filer  Member of the U.S.  Status	
Only) /	(Office Use Only)	(Daytime Telephone)		(Full Name)	
PM 4: 21	2003/AY 14 PM 4: 21	(202) 225-2576	Henry	Patrick Timothy McHenry	
	.o .o .o				_
		For use by Members, officers, and employees	CALENDAR YEAR 2007	FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2007	<b>T</b>
		FORM A Page 1 of 7	PRESENTATIVES	UNITED STATES HOUSE OF REPRESENTATIVES	$\equiv$
HAND DELIVERE					

SCHEDULE III .
- ASSETS
AND "UN
<b>IEARNED</b> '
' INCOME

in the optional column on the far left. plans that are not self-directed, name the institution holding the account that of your spouse (SP) or dependent child (DC) or is jointly held (JT), If you so choose, you may indicate that an asset or income source is Government retirement programs. parent or sibling; any deposits totaling \$5,000 or less in personal debt owed to you by your spouse, or by your or your spouse's child, Exclude: Your personal residence(s) (unless there is rental income); any that is not publicly traded, state the name of the business, the nature of and its value at the end of the reporting period. For an active business in the account that exceeds the reporting threshold. For retirement a fair market value exceeding \$1,000 at the end of the reporting period, savings accounts; any financial interest in or income derived from U.S. investments), provide the value and income information on each asset in which you have the power, even if not exercised, to select the specific retirement plans (such as 401(k) plans) that are self directed (i.e., plans mutual funds (do not use ticker symbols). For all IRAs and other than \$200 in "unearned" income during the year. For rental property or and (b) any other assets or sources of income which generated more information, see the instruction booklet. its activities, and its geographic location in Block A. For additional land, provide a complete address. Provide full names of stocks and identify (a) each asset held for investment or production of income with Asset and/or Income Source 215 Robinson Rd., Gastonia partnership - real estate & 8th Ave., below) real estate (holdings Union Rd NC (50% ownership) Garrison Blvd., below) McHenry-McHenry (10% ownership) 109 W. 8th Ave., Gastonia NC (10% ownership) 5524 Union Rd., Gastonia NC McHenry-Putman Partnership (holdings Robinson Rd. & \$250,000 \$100,001 see below \$15,001 \$50,000 \$15,001 -\$50,000 see below the value should be value, please specify at close of reporting it is generated income included only because asset was sold and is the method used. If an other than fair market valuation method year. If you use a Value of Asset Year-End Name Patrick Timothy McHenry **BLOCK B** RENT see below RENT RENT see below a brief description in this apply. Check "None" it Partnership income or block. (For example: categories, specify the calendar year. If other any income during the Check all columns that type of income by writing than one of the listed asset did not generate Type of Income BLOCK C \$15,001 - \$50,000 \$5,001 - \$15,000 \$5,001 - \$15,000 see below checking the appropriate see below box below. Dividends, even category of income by other assets, indicate the investments, you may write accounts that do not allow listed as income. Check "NA" for income. For all For retirement plans or if reinvested, should be you to choose specific 'None" if no income was Amount of Income BLOCK D \$1,000 in exceeding exchanges (E) reporting year. (P), sales (S), or had purchases Transaction ndicate if asset Page 2 of 7 BLOCKE

SCHEDULE III - ASSETS AND "UNEARNED" INCOME		Name Patrick Timothy McHenry		Page 3 of 7
621 W. Garrrison Blvd., Gastonia NC (50% ownership)	\$50,001 - \$100,000	RENT	\$5,001 - \$15,000	
Alliance Bank and Trust checking account	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
ING Direct Savings Account	\$100,001 - \$250,000	INTEREST	\$2,501 - \$5,000	
SCANA common stock	\$15,001 - \$50,000	DIVIDENDS	\$2,501 - \$5,000	
Alliance Bank and Trust stock	\$1,001 - \$15,000	None	NONE	
Locust Highway 200 LLC (real estate partnership (.294% ownership)	\$15,001 - \$50,000	None	NONE	
806 Requa Rd., Cherryville NC (rental property)	\$100,001 - \$250,000	RENT	\$5,001 - \$15,000	
4211 Pete Brown Rd., Charlotte NC (10% ownership	None	CAPITAL GAINS	\$100,001 - \$1,000,000	<u></u> တ

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## SCHEDULE IV - TRANSACTIONS

Name Patrick Timothy McHenry

Page 4 of 7

Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded \$1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. Provide a brief

	the second of th			
SP.				
DC,		Type of		
JT,	Asset	Transaction	Date	Amount of Transaction
	4211 Pete Brown Rd., Charlotte NC (10%	SALE	07-31-07	\$100,001 - \$250,000
	ownership)			

## SCHEDULE V - LIABILITIES

Name Patrick Timothy McHenry

Page 5 of 7

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report "revolving charge accounts" (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000.

SP, DC,	Creditor	Type of Liability	Amount of Liability
	Mr. & Mrs. George LeCroy, Hendersonville, NC (previous owners of property)	Mortgage on 215 Robinson Rd., Gastonia NC	\$100,001 - \$250,000
	First Gaston Bank, Gastonia, NC	Mortgage on 621 W. Garrison Blvd., Gastonia NC	\$10,001 - \$15,000
	Citizens South Bank, Gastonia, NC	Mortgage - 806 Requa Rd., Gastonia NC	\$50,001 - \$100,000

## SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Patrick Timothy McHenry Page 6 of 7

spouse or dependent child that is totally independent of his or her relationship to you. the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$305 received by you,

Source	Date(s)	Point of Departure DestinationPoint of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family ? Food? Member Included? (Y/N) (Y/N)	Days not at sponsor's expense
Heritage Foundation, Washington DC	Feb. 1-3	DC-Baltimore-DC	~	<b>~</b> (	Z	None
American-Israel Education Foundation, Washington DC	Aug. 4-12	DC-Jerusalem-Tel Aviv- Tiberius-DC-Charlotte	Υ	Υ	Z	None

## SCHEDULE VIII - POSITIONS

Name Patrick Timothy McHenry

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representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I. Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor,

Position	Name of Organization
Partner	McHenry-McHenry Partnership
Partner	McHenry-Putman Partnership
Sole Proprietor	McHenry Real Estate (no assets)